

**ACKNOWLEDGEMENT AND RECORD OF SPCC INSPECTION AND PLAN REVIEW  
BULK STORAGE FACILITIES**

**UNITED STATES ENVIRONMENTAL PROTECTION AGENCY – REGION 6**

1445 Ross Avenue 6 SF PO Dallas Texas 75202 2733

SPCC Case # <u>FY-INSP-090182</u>		FRP ID <u>FRP-06-AR-00053</u>	
SPCC Inspection Date: <u>8/24/2009</u> Time <u>9 00 AM</u>		FRP Inspection Date. <u>8/24/2009</u> Time. <u>9 00 AM</u>	
Name of Facility <u>Ft Smith Terminal</u>			
Latitude <u>N 35°18 34"</u>		Longitude <u>W 94°23 38"</u> Source <u>FRP</u>	
Facility Address/Location <u>8101 Highway 71 South</u>			
<input type="checkbox"/> Tribal Land Reservation Name _____			
City <u>Ft Smith</u>		County/Parish <u>Sebastian</u> State <u>AR</u> Zip <u>72903</u>	
Facility Contact <u>Douglas Hammer</u>		Title <u>Supervisor Operation &amp; Management</u>	
Telephone Number <u>479-646 1721</u>		Email _____	
Name of <input checked="" type="checkbox"/> Owner/ <input checked="" type="checkbox"/> Operator <u>Magellan Pipeline Company, LP</u>			
Address <u>One Williams Center P.O. Box 2186</u>			
City <u>Tulsa</u>		State <u>OK</u> Zip <u>74121 2186</u>	
Contact _____		Title _____	
Telephone Number <u>918 574 7310</u>		Email _____	
Synopsis of Business <u>Storage and distribution of refined petroleum products</u>			
How many employees work at this facility? _____			NAICS # _____
If unmanned how many employees maintain this facility? _____			
Is the Facility <input type="checkbox"/> Unattended <input type="checkbox"/> Attended( <input type="checkbox"/> Daily (8 hr) <input type="checkbox"/> Daily (24 hr) <input type="checkbox"/> Periodically )			
Route of Entry to Waterway <u>Northwest to Mill Creek North to Arkansas River</u>			
Distance to waterway (in feet) <u>1000</u>			
Relative direction to water body <u>Northwest</u>		Elevation above water body (ft) _____	
SPCC Inspector name <u>Tom McKay</u>		FRP Inspector name <u>Don Smith</u>	
Team members <u>Don Smith Mike Clonts</u>		Team members <u>Tom McKay Mike Clonts</u>	
SPCC Plan review by <u>Tom McKay</u>		FRP review by <u>Mike Clonts</u>	
Date of review <u>8/1/2009</u>		Date of review _____	

**Acknowledgement of Inspection**

Company Contact \_\_\_\_\_  
Inspector Tom McKay

Title \_\_\_\_\_  
Title Inspector EPA/SEE

9490489



<b>Memorandum Of Understanding</b> <b>(check all applicable descriptions)</b>					
<b>Non Transportation Related</b>			<b>Transportation Related</b>		
<input checked="" type="checkbox"/> EPA			<input type="checkbox"/> USCG <input type="checkbox"/> MMS <input type="checkbox"/> OPS		
<b>Facility Type</b>					
<b>Onshore Oil</b> <input type="checkbox"/> Production <input type="checkbox"/> Drilling/workover			<b>Offshore Oil</b> <input type="checkbox"/> Drilling Production and Workover		
<input checked="" type="checkbox"/> <b>Bulk Storage</b> (check all applicable descriptions)					
<input type="checkbox"/> Aviation <input type="checkbox"/> Animal Fats & Oils <input type="checkbox"/> Asphalt Paving <input type="checkbox"/> Asphalt Coatings <input type="checkbox"/> Auto Dealership <input type="checkbox"/> Bulk Packing <input type="checkbox"/> Concrete/Cement <input type="checkbox"/> Crude Petroleum <input type="checkbox"/> Farm	<input type="checkbox"/> Federal Facility <input type="checkbox"/> Gathering Facility <input type="checkbox"/> Hospital <input type="checkbox"/> Manufacturing Lube/Grease <input type="checkbox"/> Manna <input type="checkbox"/> Military <input type="checkbox"/> Mining <input type="checkbox"/> Natural Gas Liquids <input type="checkbox"/> Petrochemical	<input type="checkbox"/> Petroleum Distributor <input checked="" type="checkbox"/> Petroleum Marketing Terminal <input type="checkbox"/> Pipeline Bulk Storage <input type="checkbox"/> Railroad <input type="checkbox"/> Remediation/Recycling <input type="checkbox"/> Refinery <input type="checkbox"/> Rental Car Company <input type="checkbox"/> Sand & Gravel facility <input type="checkbox"/> School/University	<input type="checkbox"/> Service Station <input type="checkbox"/> Transporter (Truck/Rail) <input type="checkbox"/> Tribal <input type="checkbox"/> Utilities <input type="checkbox"/> State <input type="checkbox"/> Local <input type="checkbox"/> Other		
<b>Applicable Storage Containers</b> (check all applicable descriptions)					
<input checked="" type="checkbox"/> Aboveground Storage Tanks  <input type="checkbox"/> Mobile/portable storage Units		<input type="checkbox"/> Underground Storage Tanks  <input type="checkbox"/> Surface impoundments	<input checked="" type="checkbox"/> Drums  <input type="checkbox"/> Lagoons	<input checked="" type="checkbox"/> In plant piping  <input type="checkbox"/> Equipment	<input type="checkbox"/> Other containers _____ _____
<b>Storage Function</b> (check all applicable descriptions)					
<input checked="" type="checkbox"/> Transferring	<input checked="" type="checkbox"/> Distributing	<input type="checkbox"/> Processing	<input type="checkbox"/> Gathering	<input type="checkbox"/> Consuming/Using	<input type="checkbox"/> Operations
<b>Facility Storage Capacities</b>					
AST Storage Capacity (gal) <u>8,329,719</u>		UST Storage Capacity (gal) _____		Total Facility Capacity (gal) <u>8,329,719</u>	
<b>Types of Oil Stored</b> <input type="checkbox"/> Crude oil <input checked="" type="checkbox"/> Gasoline <input type="checkbox"/> Diesel <input type="checkbox"/> Fuel oil <input type="checkbox"/> Jet fuel <input type="checkbox"/> Vegetable oil/animal fats grease <input checked="" type="checkbox"/> Other <u>Distillates, Additives, Water/Oil</u>					
<b>Qualified Facility Thresholds</b> <input type="checkbox"/> <5 000 Gallons					<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
The aggregate aboveground storage capacity is 10 000 Gallons or less 112 3(g)(1) <b>AND</b>					<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
The facility has had no single discharge exceeding 1 000 U S gallons and the facility has had no two discharges exceeding 42 U S gallons within any twelve month period in the three years prior to the SPCC Plan self-certification date or since becoming subject to the rule if the facility has been in operation for less than three years (Note Oil discharges that result from natural disasters acts of war or terrorism are not included in this qualification determination ) 112 3(g)(2)					<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
Is the facility considered a Qualified Facility? If YES to both questions above <b>AND</b> the owner/operator has self certified the SPCC Plan then check YES and complete Appendix A					<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

**GENERAL APPLICABILITY - 40 CFR 112.1**

Does the facility maintain an aggregate aboveground oil storage capacity of over 1 320 gallons and/or completely buried oil storage capacity of over 42 000 gallons?

☒ YES ☐ NO

and

Is the facility engaged in drilling producing gathering storing processing refining transferring distributing using or consuming oil and oil products which due to its location could reasonably be expected to discharge oil into or upon the navigable waters of the United States (as defined in 40 CFR 110.1)?

☒ YES ☐ NO

If YES to both, the facility is regulated under 40 CFR 112

**Note** The following storage capacity is not considered in determining applicability of SPCC requirements

Completely buried tanks subject to all the technical requirements of 40 CFR 280 or a state program approved under 40 CFR 281

Equipment subject to the authority of the U.S. Department of Transportation U.S. Department of the Interior or Minerals Management Service as defined in Memoranda of Understanding dated November 24 1971 and November 8 1993

Any facility or part thereof used exclusively for wastewater treatment and not used to satisfy SPCC requirements

Containers smaller than 55 gallons

Permanently closed containers

**FACILITY RESPONSE PLAN (FRP) APPLICABILITY**

Does the facility transfer oil over water to or from vessels and has a total oil storage capacity greater than or equal to 42 000 gallons?

☐ YES ☒ NO

Or

Does the facility have a total oil storage capacity of at least 1 million gallons

☒ YES ☐ NO

And

at least one of the following is true

The facility does not have secondary containment sufficiently large enough to contain the capacity of the largest aboveground tank plus sufficient freeboard for precipitation

☐ YES ☒ NO

The facility is located at a distance such that a discharge could cause injury to fish and wildlife and sensitive environments

☒ YES ☐ NO

The facility is located such that a discharge would shut down a public drinking water intake

☐ YES ☒ NO

The facility has had a reportable discharge greater than or equal to 10 000 gallons in the past 5 years

☐ YES ☒ NO

If YES to any of the above the facility is a non transportation related onshore facility required to prepare and implement a FRP as outlined in 40 CFR 112.20

Does the facility maintain a FRP? ☒ YES ☐ NO ☐ Not Required

FRP Number FRP-06 AR-00053

Does the Plan include a signed copy of the Certification of the Applicability of the Substantial Harm Criteria per 40 CFR Part 112.20(e)? Attachment C II

☒ YES ☐ NO

Comment

**REQUIREMENTS FOR PREPARATION AND IMPLEMENTATION OF A SPCC Plan – 40 CFR 112 3**

Facility Startup Date

1954

Date of initial SPCC Plan preparation

Current Plan version (date/number)

6/13/2003

For facilities (excluding farms) in operation prior to August 16 2002 was the Plan amended and implemented by July 1 2009? 112 3(a) ☒ YES ☐ NO ☐ N/A

For facilities (excluding farms) beginning operation between August 17 2002 and July 1 2009 is the Plan prepared and fully implemented by July 1 2009? 112 3(a) ☐ YES ☐ NO ☒ N/A

For facilities beginning operation after July 1 2009 was the Plan implemented before beginning operations? 112 3(b) & (c) ☐ YES ☐ NO ☒ N/A

Is an SPCC Plan prepared? ☒ YES ☐ NO ☐ N/A

Professional Engineer certification must include statements that the PE attests to 112 3(d)

He/she is familiar with the requirements of the SPCC rule (i) ☒ YES ☐ NO ☐ N/A

He/she or his/her agent has visited and examined the facility (ii) ☒ YES ☐ NO ☐ N/A

The Plan has been prepared in accordance with good engineering practice including consideration of applicable industry standards and with the requirements of the SPCC rule (iii) ☒ YES ☐ NO ☐ N/A

Procedures for required inspections and testing have been established (iv) ☐ YES ☐ NO ☒ N/A

The Plan is adequate for the facility (v) ☐ YES ☐ NO ☒ N/A

Is the SPCC Plan fully PE certified? 112 3(d) ☒ YES ☐ NO Date of Certification 6/13/2003

Name of Professional Engineer Robert D. Sholl

License Number 6982

State AR

Is an SPCC Plan available for review? ☒ YES ☐ NO  
(During normal working hours) 112 3(e)(2)

Is an SPCC Plan maintained on site? ☒ YES ☐ NO  
(For at least 4 hours/day excluding oil production facilities) 112 3(e)(1)

**AMENDMENT OF SPCC PLAN BY REGIONAL ADMINISTRATOR (RA)—40 CFR 112 4**

Have there been reportable spills at this facility of more than 1 000 gallons? 112 4(a) ☐ YES ☐ NO ☒ N/A

Or has the facility had two spills of more than 42 gallons in the past 12 months? 112 4(a) ☐ YES ☐ NO ☒ N/A

If YES to either was information submitted to the RA as required in §112 4(a)? ☐ YES ☐ NO ☒ N/A

Date of spills \_\_\_\_\_

If applicable have changes required by the RA been implemented in the Plan and/or facility? 112 4(d) (e)

☐ YES ☐ NO ☒ N/A

Comment

# **AMENDMENT OF SPCC PLAN BY THE OWNER OR OPERATOR—40 CFR 112.5**

Has there been any change of facility design (construction, operation, or maintenance) that could affect the facility's potential for discharge? (112.5a) ☐ YES ☐ NO ☒ N/A

If YES, was the amendment within 6 months and was a plan change ☐ Yes ☐ No or a design change ☐ Yes ☐ No

Is the SPCC Plan reviewed and evaluated every 5 years? ☒ YES ☐ NO ☐ N/A

If amended and implemented (if necessary), is it documented in the Plan (sign off sheet)? 112.5(b) ☒ YES ☐ NO ☐ N/A

Date of latest change \_\_\_\_\_ Certification # \_\_\_\_\_

Name of PE certifying amendments 112.5(c) (Except for self-certified Plans) \_\_\_\_\_

License # \_\_\_\_\_ State \_\_\_\_\_ Date of Certification \_\_\_\_\_

Reason for amendment \_\_\_\_\_

Comment \_\_\_\_\_

GENERAL REQUIREMENTS FOR SPCC PLANS 112.7(a-d)	Plan Review	Field Verification
<p>Does the SPCC Plan indicate (by signature and date) that management has approved the plan? 112.7</p> <p>Mgmt Personnel Name <u>Doug Hammer</u></p> <p>Mgmt Personnel Title <u>Supervisor Operations</u></p>	<p><input checked="" type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A</p>	
<p>Does the Plan format follow the sequence in the rule? 112.7 or</p> <p>If no, is a cross reference provided?</p> <p>Does the Plan call for additional facilities or procedures, methods, or equipment not yet fully operational?</p> <p>If yes, are the following items discussed in the Plan?</p> <p><input type="checkbox"/> Installation <input type="checkbox"/> Start up</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A</p> <p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A</p>	
<p>Does the Plan include a discussion of conformance with SPCC requirements? 112.7(a)(1)</p>	<p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A</p>	
<p>Does the Plan deviate from SPCC requirements? 112.7(a)(2)</p> <p>If yes, does the plan provide</p> <p>Written documentation validating/explaining rationale for non-conformance with the SPCC requirements? and</p> <p>Written documentation outlining/detailing the alternative method/how it achieves environmental equivalence?</p>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A</p>	
<p>Does the Plan contain a facility diagram? 112.7(a)(3)</p>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A</p>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A</p>

<p><b>Does the diagram include</b></p> <p><input type="checkbox"/> The location and contents of each container? and</p> <p><input type="checkbox"/> Completely buried storage tanks? and</p> <p><input type="checkbox"/> Transfer stations? and</p> <p><input type="checkbox"/> Connecting pipes?</p>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A</p>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A</p>
<p><b>Is there a description in the Plan of the physical layout of the facility and includes</b> 112 7(a)(3)</p> <p><b>The type of oil in each container and its storage capacity?</b> 112 7(a)(3)(i)</p> <p><b>Discharge prevention measures including procedures for routine handling of products?</b> 112 7(a)(3)(ii)</p> <p><b>Discharge or drainage controls such as secondary containment around containers and other structures equipment and procedures for the control of a discharge?</b> 112 7(a)(3)(iii)</p> <p><b>Countermeasures for discharge discovery response and cleanup (including facility and contractor resources)?</b> 112 7(a)(3)(iv)</p> <p><b>Methods for disposal of recovered materials in accordance with applicable legal requirements?</b> 112 7(a)(3)(v)</p> <p><b>Contact list and phone numbers for the facility response coordinator NRC cleanup contractors and federal state and local agencies who must be notified in the case of a discharge as described in §112 1(b)?</b> 112 7(a)(3)(vi)</p>	<p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A</p> <p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A</p> <p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A</p> <p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A</p>	<p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A</p> <p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A</p> <p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A</p>
<p><b>Does the Plan include information and procedures for reporting a discharge (exact location phone number date/time of material discharged quantity actions taken evacuations notifications (names/organizations etc)?)</b> 112 7(a)(4)</p>	<p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A</p>	
<p><b>Does the Plan include procedures to use when a discharge may occur?</b> 112 7(a)(5)</p>	<p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A</p>	
<p><b>Does the Plan include a prediction and description of major equipment failure(s) that could result in a discharge from the facility per 40 CFR 112 7(b)?</b></p> <p><input checked="" type="checkbox"/> direction <input checked="" type="checkbox"/> rate of flow and <input checked="" type="checkbox"/> total quantity of oil</p>	<p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A</p>	
<p><b>Does the Plan discuss appropriate containment and/or diversionary structures/equipment (dikes berms retaining walls curbing culverts gutters/drain systems weirs boom diversion/retention ponds sorbent material) and is sufficiently impervious to contain oil per 40 CFR 112 7(c)</b></p>	<p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A</p>	<p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A</p>
<p><b>Has it been determined in the Plan that the installation of structures or equipment (containment) is not practicable?</b> 112 7(d) If YES check <input type="checkbox"/> then 40 CFR Part 109 Checklist must be filled out and</p> <p><b>Is the impracticability clearly demonstrated?</b></p> <p><b>For bulk storage containers is periodic integrity testing of containers and leak testing of the valves and piping associated with the container conducted?</b></p> <p><b>Is a strong contingency plan per 40 CFR 109 provided?</b> 112 7(d)(1)</p> <p><b>Is a written commitment of manpower equipment and material (to control and remove any quantity of oil discharged) provided in the SPCC plan?</b> 112 7(d)(2)</p>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A</p>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A</p>

Comment

The digital version of the Spill Prevention Control and Countermeasure (SPCC) plan did not contain a signed management approval certification

**INSPECTIONS, TESTS, AND RECORDS 112 7(e)**

**Plan Review**

**Field Verification**

Are inspections and tests required by 40 CFR 112 conducted in accordance with written procedures developed for the facility? 112 7(e)

☒ YES ☐ NO ☐ N/A

☒ YES ☐ NO ☐ N/A

If Yes are written procedures records of inspections and/or customary business records

Signed by the appropriate supervisor or inspector?

☒ YES ☐ NO ☐ N/A

☒ YES ☐ NO ☐ N/A

Kept with the SPCC Plan?

☒ YES ☐ NO ☐ N/A

☒ YES ☐ NO ☐ N/A

Maintained for a period of three (3) years?

☒ YES ☐ NO ☐ N/A

☒ YES ☐ NO ☐ N/A

Comment

**PERSONNEL TRAINING AND DISCHARGE PREVENTION PROCEDURES 112 7 (f)**

**Plan Review**

**Field Verification**

Are oil handling personnel trained on 112 7(f)(1)

The operation and maintenance of equipment to prevent the discharge of oil?

☒ YES ☐ NO ☐ N/A

☒ YES ☐ NO ☐ N/A

Discharge procedure protocols (discovery and notification)?

☒ YES ☐ NO ☐ N/A

☒ YES ☐ NO ☐ N/A

Applicable pollution control laws rules and regulations?

☐ YES ☒ NO ☐ N/A

☐ YES ☒ NO ☐ N/A

General facility operations?

☐ YES ☒ NO ☐ N/A

☐ YES ☒ NO ☐ N/A

The contents of the Plan?

☒ YES ☐ NO ☐ N/A

☒ YES ☐ NO ☐ N/A

Is there a designated person accountable for spill prevention? 112 7(f)(2)

☒ YES ☐ NO ☐ N/A

☒ YES ☐ NO ☐ N/A

Name and title of individual? Craig Doty

Are spill prevention briefings scheduled periodically? 112 7(f)(3)

☒ YES ☐ NO ☐ N/A

☒ YES ☐ NO ☐ N/A

What is the schedule (minimum at least once a year)?

☐ Monthly

☐ Quarterly

☐ Semi annually

☒ Annual

**Comment**

The SPCC plan did not contain all of the requisite training protocols for oil handling personnel. The inspection checklist boxes marked No are not addressed inadequately addressed or not located in the plan and require immediate correction. Covered during annual safety meeting and

revised

SECURITY (excluding oil production facilities) 112 7(g)	Plan Review	Field Verification
<p><b>Environmental Equivalence</b> <input type="checkbox"/> (If environmental equivalence declared by PE complete Appendix D of this checklist)</p> <p><b>Qualified Facility</b> <input type="checkbox"/> (If the facility is a qualified facility complete section 112 7(k) and Appendix A of this checklist.)</p>		
<p>Is the facility fully fenced and are entrance gates locked and/or guarded when not in production or unattended? 112 7(g)(1)</p> <p>EE <input type="checkbox"/> QF <input type="checkbox"/></p>	<p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A</p>	<p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A</p>
<p>Are master flow and drain valves that permit direct outward flow to the surface secured in closed position when in a non operating or standby status? 112 7(g)(2)</p> <p>EE <input type="checkbox"/> QF <input type="checkbox"/></p>	<p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A</p>	<p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A</p>
<p>Are starter controls on pumps locked in the off position or located at a site accessible only to authorized personnel when in non operating or standby status? 112 7(g)(3)</p> <p>EE <input type="checkbox"/> QF <input type="checkbox"/></p>	<p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A</p>	<p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A</p>
<p>Are transfers at loading/unloading (facility pipeline/piping) connections securely capped or blank flanged when not in service or standby status? 112 7(g)(4)</p> <p>EE <input type="checkbox"/> QF <input type="checkbox"/></p>	<p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A</p>	<p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A</p>
<p>Does the facility lighting appear to be adequate (commensurate with the type/location of the facility) to facilitate the discovery of spills during hours of darkness and to deter vandalism? 112 7(g)(5)</p> <p>EE <input type="checkbox"/> QF <input type="checkbox"/></p>	<p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A</p>	<p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A</p>
<p><b>Comment</b></p>		





Does the Plan include a risk analysis and/or evaluation of field-constructed aboveground tanks for brittle fracture after tank repair/alteration/ or when a change in service has occurred? 112 7(i)	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A
Comment ----- -----		

Does the Plan include a discussion of conformance with applicable requirements of the SPCC rule or any applicable state rules regulations and guidelines and other effective discharge prevention and containment procedures listed in 40 CFR Part 112? 112 7(j)	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A
Comment ----- -----		

QUALIFIED OIL FILLED OPERATIONAL EQUIPMENT SECONDARY CONTAINMENT OPTION 112 7(k)	Plan Review	Field Verification
Is there qualified oil filled operational equipment at the facility? (Oil storage containers and associated piping intrinsic to the operation of the equipment in which the oil is present solely to support the function of the apparatus or the device )  Has the facility qualified for the secondary containment option? 112 7(k)	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A
Has a single reportable discharge as described in §112 1(b) from any oil filled operational equipment exceeding 1 000 U S gallons occurred within any 12 month period within the three years prior to Plan certification date?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A
Have two reportable discharges as described in §112 1(b) from any oil filled operational equipment each exceeding 42 U S gallons occurred within any 12 month period within the three years prior to Plan certification date?  If YES for either secondary containment is required See 112 7(c) If NO and no secondary containment is provided then	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A
Are facility procedures for inspections/monitoring program established and documented? 112 7(k) (2)(i)	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A
Does the facility maintain a Facility Response Plan? 112 7(k) (2)(ii)	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A
Is there a Contingency plan following 40 CFR part 109 (see Appendix D checklist) provided? <u>AND</u>	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A
Is there a written commitment of manpower equipment and materials required to control and remove any quantity of oil discharged that may be harmful?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A

Comment
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<b>FACILITY DRAINAGE 112 8(b)</b> <b>Environmental Equivalence</b> <input type="checkbox"/> (If environmental equivalence declared by PE complete Appendix D of this checklist)	<b>Plan Review</b>	<b>Field Verification</b>
Is drainage from diked storage areas restrained by valves to prevent a discharge into the drainage system or facility effluent treatment system? 112 8(b)(1) EE <input type="checkbox"/>	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
If YES is the facility designed to control such discharge?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
Is drainage from diked storage areas that drain directly into a watercourse restrained via manual open and closed designed valves? 112 8(b)(2) If YES EE <input type="checkbox"/>	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
Is runoff rainwater from diked areas inspected such that it will not cause a harmful discharge (as defined in 40 CFR 110)? 112 8(c)(3)(iii)	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
Are valves opened and resealed under responsible supervision? 112 8(c)(3)(iii)	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
Are adequate records (or NPDES permit records) of dike drainage events maintained? 112 8(c)(3)(iv)	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
Does drainage from undiked areas flow into catchment basins ponds or lagoons designed to retain oil or return it to the facility? 112 8(b)(3) EE <input type="checkbox"/>	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
If YES is the catchment basin located in areas not subject to periodic flooding?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
If NO for the final discharge of all ditches inside the facility is there a diversion system to retain spills in the facility? 112 8(b)(4) EE <input type="checkbox"/>	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A
Is drainage water continuously treated in more than one treatment unit in the facility? 112 8(b)(5) EE <input type="checkbox"/>	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A
If Yes are two "lift" pumps provided of which one is permanently installed or is the drainage system engineered to prevent a discharge in case of equipment failure or human error?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A
Comment		

BULK STORAGE CONTAINERS 112 8(c) (See Container Inspection Forms)	Plan Review	Field Verification
<b>Environmental Equivalence</b> <input type="checkbox"/> (If environmental equivalence declared by PE complete Appendix D of this checklist)  <b>Qualified Facility</b> <input type="checkbox"/> (If the facility is a 'qualified facility' complete section 112 7(k) and Appendix A of this checklist.)		
Is the material and construction of containers compatible to the oil stored and to the conditions of storage such as pressure and temperature etc ? 112 8(c)(1)  <div style="text-align: right;">EE <input type="checkbox"/></div>	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
Do all container installations have secondary containment (Note drainage trench enclosures that terminate to a facility catchment basin or holding pond may be used)? 112 8(c)(2) If Yes  (Can not use Environmental Equivalence for this part)  Will the containment(s) hold the capacity of the largest single container plus sufficient freeboard for precipitation?  Are containment systems including walls and floors sufficiently impervious to contain discharged oil?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A   <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A  <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A   <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A  <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
Is there drainage of uncontaminated rainwater from diked areas into a storm drain or open watercourse? If YES	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
Are bypass valves on diked areas sealed closed when not draining uncontaminated rainwater? 112 8(c)(3)(i) <div style="text-align: right;">EE <input type="checkbox"/></div>	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
Is retained rainwater inspected to ensure that its presence will not cause a discharge as described in §112 1(b)? 112 8(c)(3)(ii) <div style="text-align: right;">EE <input type="checkbox"/></div>	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
Are bypass valve opened and resealed under responsible supervision? 112 8(c)(3)(iii) <div style="text-align: right;">EE <input type="checkbox"/></div>	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
Are adequate records of drainage maintained? 112 8(c)(3)(iv) <div style="text-align: right;">EE <input type="checkbox"/></div>	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
Are there completely buried metal storage tanks at the facility? 112 8(c)(4) EE <input type="checkbox"/>  If YES are they regulated under 40 CFR part 280 or state program approved under 40 CFR part 281? 112 1(d)(2)(i) If NO  Were they installed after January 10 1974 are tanks protected from corrosion (compatible with soil conditions)? and  Are tanks subject to regular leak testing?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A  <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A  <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A  <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A  <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A  <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A  <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A
Are there partially buried containers at the facility? 112 8(c)(5) EE <input type="checkbox"/>  If YES are buried sections protected from corrosion (compatible with local soil conditions)?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A  <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A  <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A
Does the Plan indicate that visual inspections of the outside of tanks are performed? 112 8(c)(6) and <div style="text-align: right;">EE <input type="checkbox"/></div>	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A

<p>Are aboveground tanks at this facility subject to periodic integrity testing or other systems of nondestructive shell testing (by qualified personnel) whenever material repairs are made? 112 8(c)(6) EE <input type="checkbox"/> QF <input type="checkbox"/></p>	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A
<p>What type(s) and frequency of test?</p>		
<p>Hydrostatic? or <input type="checkbox"/> Monthly <input type="checkbox"/> Bi-annual <input type="checkbox"/> Annual <input type="checkbox"/> 5 yr <input type="checkbox"/> 10 yr <input type="checkbox"/> 15 yr</p>	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A
<p>Magnetic Particle? or <input type="checkbox"/> Monthly <input type="checkbox"/> Bi-annual <input type="checkbox"/> Annual <input type="checkbox"/> 5 yr <input type="checkbox"/> 10 yr <input type="checkbox"/> 15 yr</p>	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A
<p>Penetrant dye? or <input type="checkbox"/> Monthly <input type="checkbox"/> Bi-annual <input type="checkbox"/> Annual <input type="checkbox"/> 5 yr <input type="checkbox"/> 10 yr <input type="checkbox"/> 15 yr</p>	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A
<p>Ultrasonic? or <input type="checkbox"/> Monthly <input type="checkbox"/> Bi-annual <input type="checkbox"/> Annual <input type="checkbox"/> 5 yr <input type="checkbox"/> 10 yr <input type="checkbox"/> 15 yr</p>	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A
<p>Radiographic? or <input type="checkbox"/> Monthly <input type="checkbox"/> Bi-annual <input type="checkbox"/> Annual <input type="checkbox"/> 5 yr <input type="checkbox"/> 10 yr <input type="checkbox"/> 15 yr</p>	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A
<p>Acoustic Emissions? or <input type="checkbox"/> Monthly <input type="checkbox"/> Bi-annual <input type="checkbox"/> Annual <input type="checkbox"/> 5 yr <input type="checkbox"/> 10 yr <input type="checkbox"/> 15 yr</p>	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A
<p>Laser? or <input type="checkbox"/> Monthly <input type="checkbox"/> Bi-annual <input type="checkbox"/> Annual <input type="checkbox"/> 5 yr <input type="checkbox"/> 10 yr <input type="checkbox"/> 15 yr</p>	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A
<p>Other? <input type="checkbox"/> Monthly <input type="checkbox"/> Bi-annual <input type="checkbox"/> Annual <input type="checkbox"/> 5 yr <input type="checkbox"/> 10 yr <input type="checkbox"/> 15 yr</p>	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A
<p>Describe _____</p>		
<p>Are companion records of container/tank inspections (or customary business records/tests) maintained? 112 8(c)(6) EE <input type="checkbox"/> QF <input type="checkbox"/></p>	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
<p>If YES do the records indicate that inspection are conducted on</p>		
<p>Tank supports and foundations?</p>	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
<p>Signs of deterioration?</p>	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
<p>Discharges?</p>	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
<p>Accumulation of oil inside diked areas?</p>	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
<p>Are internal heating coils utilized? 112 8(c)(7) If YES EE <input type="checkbox"/></p>	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A
<p>Do steam return/exhaust lines discharge into open watercourse?</p>	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A
<p>Is steam return/exhaust discharging into an open watercourse monitored or passed through a settling tank skimmer or other separation or retention system?</p>	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A
<p>Is each containers installation engineered or updated in accordance with good engineering practice? 112 8(c)(8) EE <input type="checkbox"/></p>	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
<p>(One or more of the following must be utilized ) EE <input type="checkbox"/></p>		
<p>Do tanks have audible or visual high liquid level alarms? 112 8(c)(8)(i) or</p>	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
<p>High liquid level pump cutoff devices? 112 8(c)(8)(ii) or</p>	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A

Audible or code signal communications between gauger and pumping station? 112 8(c)(8)(iii) or	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A
A system of determining liquid level in containers such as digital computers telepulse or direct vision gauges? 112 8(c)(8)(iv)	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
Are liquid level sensing devices regularly tested? 112 8(c)(8)(v)	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
Are effluent treatment facilities observed frequently enough to detect possible system upsets that could cause a discharge as described in §112 1(b)? 112 8(c)(9) EE <input type="checkbox"/>	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
Are visible discharges which result in a loss of oil from the container including but not limited to seams gaskets piping pumps valves rivets and bolts are promptly corrected and oil in diked areas is promptly removed? 112 8(c)(10) ) EE <input type="checkbox"/>	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
Are there mobile or portable storage units at this facility? 112 8(c)(11) If YES  Are storage containers positioned to prevent discharged oil from reaching navigable water?  Is there adequate secondary means of containment with sufficient capacity to contain the largest single compartment or container and sufficient freeboard for precipitation provided?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A  <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A  <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A  <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A  <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
Comment		

FACILITY TRANSFER OPERATIONS, PUMPING AND FACILITY PROCESS 112 8(d)	Plan Review	Field Verification
Environmental Equivalence <input type="checkbox"/> (If environmental equivalence declared by PE complete Appendix D of this checklist)		
Are buried piping corrosion protected with protective wrapping and/or coating? (Must be corrosion protected on or after August 16 2002) 112 8(d)(1) or EE <input type="checkbox"/>	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
<u>Corrosion protected under part 280 or state program approved under part 281? 112 1(d)(2)(i)</u>	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A
Are sections of exposed buried piping inspected for deterioration and appropriate corrective action taken as needed? EE <input type="checkbox"/>	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A
Are not in service or standby (extended time) piping capped and blank flanged and marked as to their origin? 112 8(d)(2) EE <input type="checkbox"/>	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
Are pipe supports designed to minimize abrasion and corrosion and to allow for expansion and contraction? 112 8(d)(3) EE <input type="checkbox"/>	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A

<p>Are aboveground valves piping and appurtenances such as flange joints expansion joints valve glands and bodies catch pans pipeline supports locking of valves and metal surfaces inspected regularly? 112 8(d)(4) EE <input type="checkbox"/></p> <p>At what frequency?</p> <p>Daily or</p> <p>Weekly or</p> <p>Monthly or</p> <p>Bi monthly or</p> <p>Annual or</p> <p>Semi annual or</p> <p>Other _____</p>	<p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A</p> <p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A</p> <p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A</p>	<p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A</p> <p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A</p>
<p>Is periodic integrity and leak testing of buried piping (at the time of installation modification construction relocation or replacement) conducted? 112 8(d)(4) EE <input type="checkbox"/></p> <p>At what frequency?</p> <p>Daily or</p> <p>Weekly or</p> <p>Monthly or</p> <p>Annual or</p> <p>Other <u>Upon modification</u></p>	<p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A</p> <p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A</p>	<p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A</p>
<p>Is vehicle traffic warned of aboveground piping or other oil transfer operations? 112 8(d)(5) EE <input type="checkbox"/></p>	<p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A</p>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A</p>
<p>Comment</p>		

# Qualified Facilities Checklist

## Appendix A Qualified Facility Plan Requirements

Complete this Appendix only if the facility is a "qualified facility" as defined in §112 3(g). A qualified facility's Plan, whether certified by a PE or self-certified, must comply with all of the applicable requirements of §112 7 and subparts B and C of 40 CFR Part 112 referenced earlier in this checklist.

SPCC Inspection # FY INSP-090182

112 6-Qualified Facility Plan Requirements	Yes	No	N/A
(a) Did the owner/operator of the qualified facility self-certify the SPCC Plan? <i>If NO, see requirements for 112 3(d) above. If YES, did the owner/operator certify in the Plan that:</i>			X
(1) He or she is familiar with the requirements of 40 CFR part 112			X
(2) He or she has visited and examined the facility			X
(3) The Plan has been prepared in accordance with accepted and sound industry practices and standards			X
(4) Procedures for required inspections and testing have been established			X
(5) The Plan is being fully implemented			X
(6) The facility meets the qualification criteria set forth under §112 3 (g)			X
(7) The Plan does not deviate from any requirements as allowed by §112 7(a)(2) and 112 7(d) except as described under §112 6(c)			X
(8) Management has given full approval of the Plan and necessary resources have been committed for the Plan's full implementation			X
(b) Did the owner/operator self-certify any of the Plan's technical amendments?			X
If YES, Is the certification of any technical amendments in accordance with the provisions above (§112 6(a))?			X
(c)(1) and (d)(1) Environmental Equivalence For each alternative measure allowed under §112 7(a)(2) the Plan is accompanied by a written statement by a PE that states the reason for nonconformance and describes the alternative method and how it provides equivalent environmental protection in accordance with §112 7(a)(2)			X
(c)(2) and (d)(1) Impracticability For each determination of impracticability of secondary containment pursuant to §112 7(d) the Plan clearly explains why secondary containment measures are not practicable at this facility and provides the alternative measures required in §112 7(d) in lieu of secondary containment			X
(c)(3) Security The Plan contains one of the following: (i) The Plan complies with requirements under §112 7(g) OR (ii) The Plan complies with the requirements under §112 6(c)(3)(ii) Plan describes how the owner/operator secures and controls access to the oil handling processing and storage areas secures master flow and drain valves prevents unauthorized access to starter controls on oil pumps secures out-of service and loading/unloading connections of oil pipelines addresses the appropriateness of security lighting to both prevent acts of vandalism and assist in the discovery of oil discharges			X
(c)(4) Bulk Storage Containers The Plan contains one of the following: (i) The Plan complies with the requirements under §§112 8(c)(6) or 112 12(c)(6) as applicable OR (ii) The Plan complies with the requirements under §112 6(c)(4)(ii) • Aboveground containers supports and foundations tested for integrity on a regular schedule and whenever repairs are made • Appropriate qualifications for personnel performing tests and inspections have been determined in accordance with industry standards • The frequency and type of testing and inspections have been determined in accordance with industry standards taking into account container size configuration and design • Container supports and foundations regularly inspected • Outside of containers frequently inspected for signs of deterioration discharges or accumulation of oil inside diked areas			X



• Records of inspections and tests maintained			
(d) Did a PE certify a portion of a qualified facility's self-certified Plan? <i>If YES, the PE must certify in the Plan that</i>			X
(d)(2) (i) He/she is familiar with the requirements of 40 CFR Part 112 (ii) He/she or a representative agent has visited and examined the facility (iii) The alternative method of environmental equivalence in accordance with §112 7(a)(2) or the determination of impracticability and alternative measures in accordance with §112 7(d) is consistent with good engineering practice including consideration of applicable industry standards and with the requirements of 40 CFR Part 112			X
(b)(1) If a PE certified a portion of the Plan did a PE certify any technical amendments that affect this portion of the Plan?			X
Comments			

## Appendix B Container Inspection Form

Container ID # 1450

SPCC Inspection # FY INSP-090182

Maximum capacity (gal) 30,327 bbl

Container height (ft) 48

Nominal capacity (gal) 1

Container diameter (ft) 33

Year Built 1978

Current Status ☐ Active ☐ Standby ☐ Out of service ☐ Closed

### Material(s) Stored in Container

☐ Crude oil ☒ Gasoline ☐ Diesel ☐ Fuel oil ☐ Jet fuel ☐ Vegetable oil/animal fats grease  
Other \_\_\_\_\_

### Container Type

☒ Vertical Cylindrical ☐ External Floating Roof ☐ Geodesic Dome  
☐ Fixed Roof (Vented) ☒ Internal Floating Roof ☐ Spheroid  
☐ Coned Roof - (Vented) ☐ Hemispheroid (Noded) ☐ Horizontal Cylindrical  
☐ Coned Roof - (Not Vented) ☐ Hemispheroid (Not Noded) Other \_\_\_\_\_

### Container Material

☒ Single Wall Steel ☐ Not Painted ☐ Wooden  
☐ Double Wall Steel ☐ Fiberglass Reinforced Plastic Other \_\_\_\_\_  
☒ Painted ☐ Composite (steel with fiberglass) \_\_\_\_\_

Container Construction ☒ Welded ☐ Riveted ☐ Bolted ☐ Shop Fabricated ☐ Field Erected

Container Cathodic Protection ☐ None ☒ Sacrificial Anode(s) ☐ Impressed Current

### Inspect container including the base for leaks, specifically looking for

#### Drips, weeps, & stains

☐ Check if present and check if  
Acceptable ☐  
Or, if Unacceptable ☐  
☒ Adequate

#### Discoloration of tank

☐ Check if present and check if  
Acceptable ☐  
Or, if Unacceptable ☐  
☒ Adequate

#### Corrosion

☐ Check if present and check if  
Acceptable ☐  
Or, if Unacceptable ☐  
☒ Adequate

Comment on container inspection \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Container Foundation Material

☒ Earthen Material ☐ Ring Wall ☒ Concrete (w/impermeable mat) ☐ Concrete (w/o impermeable mat)

☐ Steel ☐ Unknown Other \_\_\_\_\_

### Inspect container foundation specifically looking for

#### Cracks

☐ Check if present and check if  
Acceptable ☐  
Or, if Unacceptable ☐  
☒ Adequate

#### Settling

☐ Check if present and check if  
Acceptable ☐  
Or, if Unacceptable ☐  
☒ Adequate

#### Gaps (between tank and foundation)

☐ Check if present and check if  
Acceptable ☐  
Or, if Unacceptable ☐  
☒ Adequate

Comment on foundation inspection .....

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.....

**Container Piping Construction**

☒ Aboveground      ☒ Underground      ☐ Steel (bare)      ☐ Steel (painted)      ☐ Steel (galvanized)

☐ Double walled      ☐ Copper      ☐ Fiberglass reinforced plastic      ☐ Unknown

Other .....

**Inspect pipes/valves, specifically looking for**

<p><b>Leaks at joints, seams, valves</b></p> <p><input type="checkbox"/> Check if present and if</p> <p style="padding-left: 40px;">Acceptable      <input type="checkbox"/></p> <p style="padding-left: 20px;">Or, if Unacceptable      <input type="checkbox"/></p> <p><input checked="" type="checkbox"/> Adequate</p> <p><b>Bowing of pipe</b></p> <p><input type="checkbox"/> Check if present and if</p> <p style="padding-left: 40px;">Acceptable      <input type="checkbox"/></p> <p style="padding-left: 20px;">Or, if Unacceptable      <input type="checkbox"/></p> <p><input checked="" type="checkbox"/> Adequate</p>	<p><b>Discoloration</b></p> <p><input type="checkbox"/> Check if present and if</p> <p style="padding-left: 40px;">Acceptable      <input type="checkbox"/></p> <p style="padding-left: 20px;">Or, if Unacceptable      <input type="checkbox"/></p> <p><input checked="" type="checkbox"/> Adequate</p> <p><b>Pooling of stored material</b></p> <p><input type="checkbox"/> Check if present and if</p> <p style="padding-left: 40px;">Acceptable      <input type="checkbox"/></p> <p style="padding-left: 20px;">Or, if Unacceptable      <input type="checkbox"/></p> <p><input checked="" type="checkbox"/> Adequate</p>	<p><b>Corrosion</b></p> <p><input type="checkbox"/> Check if present and if</p> <p style="padding-left: 40px;">Acceptable      <input type="checkbox"/></p> <p style="padding-left: 20px;">Or, if Unacceptable      <input type="checkbox"/></p> <p><input checked="" type="checkbox"/> Adequate</p>
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Comment on piping/valve inspection .....

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**Secondary Containment Types**

☒ Dikes/berms/retaining walls      ☐ Curbing      ☐ Culverts and/or gutters      ☐ Spill diversion ponds

☐ Sorbent Materials      ☐ Retention Ponds      ☐ Weirs and/or booms

Other - Loc .....

**Secondary Containment Checklist**

<p><input type="checkbox"/> Capacity does not appear to be adequate?</p> <p><input type="checkbox"/> Not sufficiently impervious to stored material?</p> <p><input type="checkbox"/> Standing water within dike or berm?</p> <p><input type="checkbox"/> Erosion or corrosion of dike or berm?</p> <p>Location .....</p>	<p><input checked="" type="checkbox"/> Drainage mechanism manually operated?</p> <p><input type="checkbox"/> Presence of stored material within dike or berm?</p> <p><input type="checkbox"/> Debris/vegetation within or on the dike or berm area?</p>
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Comment on containment inspection .....

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*Not Applicable*  
**SPCC CONTINGENCY PLAN REVIEW CHECKLIST**

**Appendix C 40 CFR Part 109—Criteria for State, Local and Regional Oil  
Removal Contingency Plans**

If a facility makes an impracticability determination for secondary containment in accordance with §112.7(d) it is required to provide an oil spill contingency plan following 40 CFR part 109. Items below must be addressed in the Plan and implemented at the facility.

SPCC Inspection # *FY INSP-090182*

<b>109.5—Development and Implementation criteria for State, local and regional oil removal contingency plans</b>	<b>Yes</b>	<b>No</b>
(a) Definition of the authorities, responsibilities and duties of all persons, organizations or agencies which are to be involved in planning or directing oil removal operations	<input type="checkbox"/>	<input type="checkbox"/>
(b) Establishment of notification procedures for the purpose of early detection and timely notification of an oil discharge including	<input type="checkbox"/>	<input type="checkbox"/>
(1) The identification of critical water use areas to facilitate the reporting of and response to oil discharges	<input type="checkbox"/>	<input type="checkbox"/>
(2) A current list of names, telephone numbers and addresses of the responsible persons (with alternates) and organizations to be notified when an oil discharge is discovered	<input type="checkbox"/>	<input type="checkbox"/>
(3) Provisions for access to a reliable communications system for timely notification of an oil discharge and the capability of interconnection with the communications systems established under related oil removal contingency plans, particularly State and National plans (e.g., NCP)	<input type="checkbox"/>	<input type="checkbox"/>
(4) An established, prearranged procedure for requesting assistance during a major disaster or when the situation exceeds the response capability of the State, local or regional authority	<input type="checkbox"/>	<input type="checkbox"/>
(c) Provisions to assure that full resource capability is known and can be committed during an oil discharge situation including	<input type="checkbox"/>	<input type="checkbox"/>
(1) The identification and inventory of applicable equipment, materials and supplies which are available locally and regionally	<input type="checkbox"/>	<input type="checkbox"/>
(2) An estimate of the equipment, materials and supplies which would be required to remove the maximum oil discharge to be anticipated	<input type="checkbox"/>	<input type="checkbox"/>
(3) Development of agreements and arrangements in advance of an oil discharge for the acquisition of equipment, materials and supplies to be used in responding to such a discharge	<input type="checkbox"/>	<input type="checkbox"/>
(d) Provisions for well defined and specific actions to be taken after discovery and notification of an oil discharge including	<input type="checkbox"/>	<input type="checkbox"/>
(1) Specification of an oil discharge response operating team consisting of trained, prepared and available operating personnel	<input type="checkbox"/>	<input type="checkbox"/>
(2) Pre designation of a properly qualified oil discharge response coordinator who is charged with the responsibility and delegated commensurate authority for directing and coordinating response operations and who knows how to request assistance from Federal authorities operating under existing national and regional contingency plans	<input type="checkbox"/>	<input type="checkbox"/>
(3) A preplanned location for an oil discharge response operations center and a reliable communications system for directing the coordinated overall response operations	<input type="checkbox"/>	<input type="checkbox"/>
(4) Provisions for varying degrees of response effort depending on the severity of the oil discharge	<input type="checkbox"/>	<input type="checkbox"/>
(5) Specification of the order of priority in which the various water uses are to be protected where more than one water use may be adversely affected as a result of an oil discharge and where response operations may not be adequate to protect all uses	<input type="checkbox"/>	<input type="checkbox"/>
(e) Specific and well defined procedures to facilitate recovery of damages and enforcement measures as provided for by State and local statutes and ordinances	<input type="checkbox"/>	<input type="checkbox"/>

*Not Applicable*

## Environmental Equivalence (EE) Checklist

### Appendix D Environmental Equivalence Requirements

Complete this Appendix only if the facility has declared "environmental equivalence" measures as described in § 112.7(a)(2). Facility owners and operators have the flexibility to deviate from specific rule provisions if the Plan states the reason for nonconformance and if equivalent environmental protection is provided by some other means of SPCC. EE declarations must be certified by a PE. For EE declarations, see portions of checklist referenced earlier.

SPCC Citation		SPCC Inspection # <i>FY INSP 090182</i>	
Is there written documentation validating/explaining rationale for non conformance with the SPCC requirements?		<input type="checkbox"/> YES <input type="checkbox"/> NO	
Is there written documentation outlining/detailing how the alternative method achieves environmental equivalence? and,		<input type="checkbox"/> YES <input type="checkbox"/> NO	
Is the alternative method			
Technically feasible?		<input type="checkbox"/> YES <input type="checkbox"/> NO	
Logistically sound?		<input type="checkbox"/> YES <input type="checkbox"/> NO	
Practicable?		<input type="checkbox"/> YES <input type="checkbox"/> NO	
Name of Professional Engineer _____			
License Number _____ State _____			
Other PE certification requirements			
Did a PE certify a portion of a qualified facility's self certified Plan? <input type="checkbox"/> YES <input type="checkbox"/> NO			
Description of environmental equivalence			
Inspector Comment			

Use additional Appendix D forms for multiple Environmental Equivalent declarations

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